

<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> </div> <div>             United States Environmental Protection Agency              Washington, D.C. 20460           </div> </div>		
<b>Water Compliance Inspection Report</b>		
<b>Section A: National Data System Coding (i.e. PCS)</b>		
Transaction Code 1 <span style="border: 1px solid black; padding: 0 2px;">N</span> 2 <span style="border: 1px solid black; padding: 0 2px;">5</span> 3 <span style="border: 1px solid black; padding: 0 2px;">D</span> <span style="border: 1px solid black; padding: 0 2px;">0</span> <span style="border: 1px solid black; padding: 0 2px;">0</span> <span style="border: 1px solid black; padding: 0 2px;">2</span> <span style="border: 1px solid black; padding: 0 2px;">5</span> <span style="border: 1px solid black; padding: 0 2px;">1</span> <span style="border: 1px solid black; padding: 0 2px;">0</span> <span style="border: 1px solid black; padding: 0 2px;">1</span> 11	NPDES 12 <span style="border: 1px solid black; padding: 0 2px;">1</span> <span style="border: 1px solid black; padding: 0 2px;">1</span> <span style="border: 1px solid black; padding: 0 2px;">0</span> <span style="border: 1px solid black; padding: 0 2px;">7</span> <span style="border: 1px solid black; padding: 0 2px;">2</span> <span style="border: 1px solid black; padding: 0 2px;">6</span> 17	yr/mo/day Inspection Type 18 <span style="border: 1px solid black; padding: 0 2px;">C</span>
Inspector 19 <span style="border: 1px solid black; padding: 0 2px;">S</span>		Fac Type 20 <span style="border: 1px solid black; padding: 0 2px;">1</span>
Remarks 21 <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>		
Inspection Work Days 67 <span style="border: 1px solid black; padding: 0 2px;">4</span> 69	Facility Self-Monitoring Evaluation Rating 70 <span style="border: 1px solid black; padding: 0 2px;">3</span>	BI 71 <span style="border: 1px solid black; padding: 0 2px;">N</span>
QA 72 <span style="border: 1px solid black; padding: 0 2px;">N</span>	Reserved 73 <span style="border: 1px solid black; padding: 0 2px;"></span> 74 <span style="border: 1px solid black; padding: 0 2px;"></span> 75 <span style="border: 1px solid black; padding: 0 2px;"></span> <span style="border: 1px solid black; padding: 0 2px;"></span> <span style="border: 1px solid black; padding: 0 2px;"></span> <span style="border: 1px solid black; padding: 0 2px;"></span> 80	
<b>Section B: Facility Data</b>		
Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number) <b>City of Tensed WWTP</b> <b>311 "C" Street</b> <b>Tensed ID, 83870</b>		Entry Time/Date <b>7/26/2011 15:00</b>
		Permit Effective Date <b>4/1/2004</b>
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Numbers <b>Robert Hartsock</b> <b>Phone/Fax: (208) 274-3239, Cell: (208) 651-4228</b> <b>Faith Harvey, Mayor</b> <b>Norm Suenkel, Benewah County, (208) 245-4122 ph, (208) 245-8032 fax</b>		Other Facility Data (e.g., SIC, NAICS, and other descriptive information) <b>Sanitary Services (SIC 4950)</b>
Name, Address of Responsible Official/Title/Phone and Fax Number <b>Robert Hartsock</b> <b>as above</b>		Contacted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Section C: Areas Evaluated During Inspection (Check only those areas evaluated)</b>		
<input checked="" type="checkbox"/> Permit <input checked="" type="checkbox"/> Records/Reports <input checked="" type="checkbox"/> Facility Site Review <input type="checkbox"/> Effluent/Receiving Waters <input type="checkbox"/> Flow Measurement	<input type="checkbox"/> Self-Monitoring Program <input type="checkbox"/> Compliance Schedule <input type="checkbox"/> Laboratory <input checked="" type="checkbox"/> Operations & Maintenance <input type="checkbox"/> Sludge Handling/Disposal	<input type="checkbox"/> Pretreatment <input type="checkbox"/> Pollution Prevention <input type="checkbox"/> Storm Water <input type="checkbox"/> Combined Sewer Overflow <input type="checkbox"/> Sanitary Sewer Overflow
<input type="checkbox"/> MS4		
<b>Section D: Summary of Findings/Comments</b> (Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)		
SEV Codes <div style="display: grid; grid-template-columns: repeat(5, 1fr); gap: 5px;"> <div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div> <div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div><div><input type="checkbox"/></div> </div>	SEV Description <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	
<div style="display: flex; justify-content: space-between;"> <div>             Name(s) and Signature(s) of Inspector(s)  <b>Jennifer Wester</b> </div> <div>             Agency/Office/Phone and Fax Numbers              Idaho DEQ/ Boise Regional Office/ 208-373-0151/ 208-373-0143           </div> <div>             Date  <b>8/24/11</b> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div>             Signature of Management QA Reviewer  <b>A. M. M. PE</b> </div> <div>             Agency/Office/Phone and Fax Numbers              Idaho DEQ/ State Office/ 208-373-0167/ 208-373-0576           </div> <div>             Date  <b>24 Aug 2011</b> </div> </div>		